REPORTS INVENTORY

CONTROL NO.

DD/S&T/ORD-16

PREPARE IN DUPLICATE

1. TITLE OF REPORT (if a fill-in report include Form No.) Coding for CONIF	2. TYPE OF REPORT	X	STATISTICAL
			NARRATIVE
			MACHINE-NAME LISTING

3. FUNCTIONAL AREA		PERSONNEL		TRAINING		ADMIN. GENERAL
	X	LOGISTICS		SECURITY		OTHER (specify)
		MEDICAL		FINANCE		

4. NO. OF COPIES PREPARED 2	5. FREQUENCY (weekly, monthly, quarterly, etc.) Daily	6. DISTRIBUTION (No. of components not number of copies) 1

7. FORMAT (memorandum, form computer print-out, etc) Form	8. ADP PROCESSING			9. DIRECTIVE AUTHORITY REQUIRING REPORT
		YES	IF YES GIVE ADP PROCESSING NO.	
	X	NO		OL

10. PREPARING COMPONENT (include lowest level contributing information to report) ORD/PMS	11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)

12. COST FACTORS

A. MANUAL PREPARATION AND REVIEW COSTS

GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT	X	TIMES PREPARED	=	COST PER YEAR
11.8	6.63		6/week		$39.78		52		$2,068.56

B. COSTS OF COMPUTER PRODUCED REPORTS

TOTAL COSTS PER YEAR	$2,068.56

13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (In addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.

Status information on all contracts.

14. FUTURE GOALS

GOAL PROPOSED BY COMPONENT FOR THIS REPORT	ESTIMATED SAVINGS	
	MAN-HOURS	DOLLARS
X RETAIN AS IS ☐ OTHER (explain)		25X1
☐ CHANGE		
☐ DISCONTINUE		

16. DATE OF INVENTORY 10-16-70	17. NAME AND TITLE OF PERSON FURNISHING INFORMATION DC/PMS/ORD	18. EXTENSION

25X1

FORM 142

(22-36-43)